PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective December 8, 2004

10/ 582884

| | | | | | | | | | 10, 202009 | | | |
|---|--|--|--|-----------------------------------|-----------------------|---------------------------------|---|---------------------|------------------------|----|---------------------|------------------------|
| CLAIMS AS FILED | | | | PART I | | | | SMALL ENT | TITY | OR | OTHER I | |
| U.S | NATIONAL S | STAGE FEES | (Coldinii | (Coldinii 1) | | Joidini 2) | 1 | RATE | FEE | 1 | RATE | FEE |
| BASIC FEE | | | | | | | | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | | | | | 1 | EXAM. FEE | | | EXAM. FEE | 200 |
| SEARCH FEE | | | | | | | | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | / 50 = | | | X \$ 125 = | | | X \$ 250 = | , , |
| TOTAL CHARGEABLE CLAIMS | | | 9/6 minus 20 = , | | * | | | X \$ 25 = | | OR | X \$ 50 = | |
| INDEPENDENT CLAIMS | | | 2 minus 3 = , | | * | | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPEN | DENT CLAIM PRI | SENT | | | | | + \$ 180 = | | OR | + \$ 360 = | 360 |
| * If | the difference | in column 1 is | less than zero, | enter "0 | " in co | lumn 2 | | TOTAL | | OR | TOTAL | 1260 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL E | NTITY | OR | OTHER T | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHI NUME PREVIO PAID I | BER JUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | CLAIM | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | | TOTAL ADDIT | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colum | nn 2) | (Column 3) | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHI NUME PREVIO PAID I | EST BER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT (| | | | CLAIM | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| * ** | If the "Highest Nu If the "Highest Nu | umn 1 is less than th umber Previously Pa umber Previously Pai mber Previously Paic | id For" IN THIS SP/ id For" IN THIS SP/ | ACE is less ACE is less | than '20 than '3', |)', enter "20". , enter "3". | | | | | | |